

Upcoming Changes to Chronic Disease Management Framework – Overview

New CCM MBS items commence: 1 July 2025

From 1 July 2025, there will be a new framework for chronic disease management.

- The changes simplify, streamline, and modernise the arrangements for health care professionals and patients.
- These changes primarily affect medical practitioners, however, allied health professionals providing MBS services should be aware of the changes to plan and referral requirements.
- Transition arrangements will be in place for 2 years to ensure current patients do not lose access to services.

What are the changes?

From 1 July 2025:

- Items for GP management plans (229, 721, 92024, 92055), team care arrangements (230, 723, 92025, 92056) and reviews (233, 732, 92028, 92059) will cease and be replaced with a new streamlined GP chronic condition management plan (see table below for item numbers)
 - The updated framework will be known as chronic condition management.
 - The GP chronic condition management plan will be available to patients with at least one medical condition that has been (or is likely to be) present for at least 6 months or is terminal.
 - To support continuity of care, patients registered through MyMedicare will be required to access the GP chronic condition management plan and review items through the practice where they are registered. Other patients will be able to access the items through their usual GP.
 - The plans are intended to support patients that would benefit from a structured approach to their care.
 - Patients will be eligible for the plan if their condition is managed by their GP or prescribed medical practitioner, whether multidisciplinary care is required.
 - Where multidisciplinary care is required, patients will be able to access the same range of services currently available through GP management plans and team care arrangements.
 - GPs and prescribed medical practitioners will refer patients with a GP chronic condition management plan to allied health services directly. The requirement to consult with at least two collaborating providers, as described under the current team care arrangements will be removed.

WHY THIS MATTERS

The changes aim to simplify, streamline, and modernise the arrangements for health professionals.

Key changes include:

- Removal of multiple plans
- Collaboration with members of the patient's multidisciplinary team will no longer be required in the development of the plan
- Use of referral letters will support the provision of relevant clinical information to allied health professionals
- Patients registered through MyMedicare will be required to access the plan and review items through the practice where they are registered, with other patients continuing to access the items through their usual GP.

CCM ACTIVATION SERIES: ACTIVITIES FOR YOUR PRACTICE

ACTIVITY 1: PATIENT ENGAGEMENT & MYMEDICARE REGISTRATION

[CLICK HERE](#)

Goal: Encourage patients with chronic conditions to register with MyMedicare.

Actions:

- Register your practice for MyMedicare
- Train staff to discuss MyMedicare with patients
- Add MyMedicare brochures/forms to consent packs
- Update your website and social media
- Display posters and videos in waiting areas

ACTIVITY 2: TEAM AWARENESS & ROLE EXPLORATION

[CLICK HERE](#)

Goal: Build internal understanding of CCM and MyMedicare.

Actions:

- Host team meetings or lunch-and-learns
- Send informative emails or post updates in staff areas
- Define clear roles for each team member in CCM workflows

Benefits:

- Strengthens patient-practice relationships
- Supports integrated, person-centred care
- Empowers nurses and health practitioners

ACTIVITY 3: COMMUNICATION STRATEGY

[CLICK HERE](#)

Goal: Develop consistent messaging and outreach for MyMedicare.

Actions:

- Understand MyMedicare's evolving benefits
- Align messaging with your practice's care philosophy
- Create talking points for staff
- Plan targeted communication (e.g. SMS, email, posters)

WHAT'S CHANGING FROM 1 JULY 2025

To encourage reviews and ongoing care, the MBS fees for planning and review items will be equalised. The fee for the preparation or review of a plan will be \$156.55 for GPs and \$125.30 for prescribed medical practitioners. Patients will also need to have their GP chronic condition management plan prepared or reviewed in the previous 18 months to continue to access allied health services.

Consistent with current arrangements, unless exceptional circumstances apply, a GP chronic condition management plan can be prepared once every 12 months (if necessary) and reviews can be conducted once every 3 months. It is not required that a new plan be prepared each year, existing plans can continue to be reviewed.

Patients that had a GP management plan and/or team care arrangement in place prior to 1 July 2025 will be able to continue to access services consistent with those plans for two years. From 1 July 2027, a GP chronic condition management plan will be required for ongoing access to allied health services.

Table 1: Chronic Condition Management Items commencing 1 July 2025*

Name of Item	GP item number	Prescribed medical practitioner item number
Prepare a GP chronic condition management plan – face to face	965	392
Prepare a GP chronic condition management plan - video	92029	92060
Review a GP chronic condition management plan – face to face	967	393
Review a GP chronic condition management plan – video	92030	92061

Key Points:

- No more Team Care Arrangement (TCA) requirement for allied health referrals
- Equal MBS fees for plan preparation and review:
- GPs: \$156.55
- Prescribed medical practitioners: \$125.30
- Review required every 18 months to maintain allied health access
- Multidisciplinary care plan items remain unchanged

NEXT STEPS FOR YOUR PRACTICE

1. Register for MyMedicare
2. Update workflows and train staff
3. Begin patient conversations and registration
4. Participate in the CCM Activation Series
5. Monitor MBS Online for updates

Where can I find more information?

The full item descriptor(s) and information on other changes to the MBS can be found on the MBS Online website. You can also subscribe to future MBS updates by visiting 'Subscribe to the MBS' on the MBS Online website.

[MBS Online – Upcoming changes to the MBS Chronic Disease Management Framework](#)